2006

Visiting Nurse Association marketing plan : meningitis disease awareness program targeting adolescents and young adults

Kristen Yahn

California State University, Monterey Bay

Kristen Yahn

12/15/06
CHHS 400- Capstone B
Instructor: Brian Simmons

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Keywords: meningococcal disease, meningitis, Adolescent diseases, childhood diseases, community health, marketing plan, health marketing plan

Abstract: This project is a marketing plan designed for the Visiting Nurse Association's meningitis outreach program. This purpose of this resource is to improve outreach to adolescents, young adults, and their parents. Resources include: a list of contacts, sample letters to parents and schools, newspaper articles regarding meningitis, a power point presentation designed for the community, sample surveys, 2006 survey results, a timeline for the project to follow, and recommendations for the future.

Executive Summary

There are nearly 3,000 cases of meningococcal disease (meningitis) every year in the U.S. According to the Centers for Disease Control and Prevention (CDC), between 10-12 percent of the cases are fatal (about 300 to 360). Among those who survive meningococcal disease, approximately 20 percent suffer long-term consequences, such as brain damage, kidney disease, hearing loss or limb amputations. Adolescents and young adults have an increased incidence of meningitis compared to the general population, accounting for nearly 30 percent of all U.S. cases annually. However, up to 83 percent of cases among adolescents may be vaccine-preventable (ACIP, 2006). In other words, of 330 fatalities per year in the US caused by meningitis, 274 are vaccine-preventable.

As a response to this, I have created a marketing plan to raise awareness of meningitis among the target group: adolescents and young adults. This project is based on measuring the efficiency of the marketing plan I made for the purpose of not only increasing awareness, but also to increase immunization rates amongst my target group.

VNA's Mission and Problem to be Addressed:

The Visiting Nurse Association and Hospice is dedicated to providing the highest quality health care to residents of the Central Coast by meeting their individual needs in an ethical, effective, caring and fiscally responsible manner.

I have interned over the past year at the VNA in the Community Services department. I have worked under the supervision of my field mentor, Andrea Zoodsma, RN., to create a marketing plan to raise awareness of meningitis among adolescents and young adults, and to increase vaccination among this population. In 2005, the National

VNA headquarters challenged every local VNA to respond to the recommendations put out by the Centers for Disease Control (CDC) and the Advisory Committee on Immunization Practices (ACIP) in 2005 (see recommendations under "description and history of the problem").

Description and History of the Problem

The biggest dangers associated with meningitis are that it is highly communicable once exposed to the bacteria, it strikes quickly, and symptoms are often not recognized on time. Meningococcal bacteria are transmitted through air droplets and/or by direct contact with secretions from infected persons, such as: kissing, sneezing or coughing on someone, living in close quarters or dormitories, and sharing eating or drinking utensils with an infected person (STOP meningitis, 2005).

Immunization is the best way to prevent meningococcal disease. In 2005, the CDC and ACIP approved new recommendations stating that preteens at the preadolescent doctor's visit (11-to-12 year-olds), or adolescents at high school entry (15-year-olds), or college freshmen living in dormitories should be immunized against meningococcal disease. Many colleges throughout the country are recommending or requiring vaccination for incoming students.

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meningitis compared to the general population, accounting for nearly 30 percent of all U.S. cases annually. However, up to 83 percent of cases among adolescents may be vaccine-preventable (ACIP, 2006). In other words, of 330 fatalities per year in the US caused by meningitis, 274 are vaccine-preventable.

Literature Review

One commonality in information regarding educating the community on meningitis is that current programs are a response to the Advisory Committee on Immunization Practices (ACIP). (ACIP) consists of 15 experts in fields associated with immunization who have been selected by the Secretary of the U. S. Department of Health and Human Services to provide advice and guidance to the Secretary, the Assistant Secretary for Health and the Centers for Disease Control and Prevention (CDC) on the most effective means to prevent vaccine-preventable diseases. The Committee develops written recommendations for the routine administration of vaccines to the pediatric and adult populations, along with schedules regarding the appropriate periodicity, dosage, and contraindications applicable to the vaccines. ACIP is the only entity in the federal government which makes such recommendations. The overall goals of the ACIP are to provide advice which will assist the Department and the Nation in reducing the incidence of vaccine preventable diseases and to increase the safe usage of vaccines and related biological products (ACIP, 2006). The common goal of meningitis outreach programs are: to help educate parents, teens, adolescents, college-bound students, and clinicians about the importance of meningitis disease prevention. In addition to ACIP, recommendations for vaccination are supported by the American Academy of Family

Physicians, American Medical Association, and American Academy of Pediatrics, American College Health Association, and the Society for Adolescent Medicine.

Project Description

The goal of my Capstone Project is to measure the efficiency of the marketing plan I created and to increase student awareness of meningitis; therefore increasing the number of students vaccinated. In order to build this plan, I:

- Researched meningitis to gain a well-rounded understanding of the disease
- Engaged in a letter writing campaign, sending letters to 15 local high schools regarding meningitis disease awareness, telling them about the VNA's program and how we can help
- Conducted follow-up phone calls to discuss options with each school and worked with them to find the right intervention for their student body
- Created a meningococcal disease awareness presentation
- Created a survey (attached) seeking information from students about the clinics, and then analyzed the survey to make recommendations (see recommendations below)
- Developed a timeline for the project to follow
- Created a 'list of contacts' database
- Compiled information into the marketing plan that includes: a 12-month timeline recommending when project-related activities should take plan, surveys and analysis of surveys from the summer 2006 vaccination clinics, sample letters to parents, school, and media, newspaper articles regarding meningitis, a list of contacts, and a sample plan for carrying out the project

Evaluation

In order to evaluate this project, I first collected data on the number of people vaccinated by the Central Coast VNA in 2005, which was 65, to use as my baseline data. During Spring 2006 I contacted schools, sent letters home with parents, wrote articles for schools newsletters, and made presentations. During Summer 2006, the Central Coast VNA held a series of meningitis vaccination clinics. At these clinics, I had each person who received a vaccination fill out a survey (see attached), to determine what worked well with my plan, and what could be improved. I used these surveys make recommendations (see below) to the marketing plan. Furthermore, I compared the post-intervention data, which is the number of people vaccinated in 2006, which was 130, to help evaluate my project. Since the number of immunizations have doubled, I have made the correlation between an increase in the number of immunizations given by the VNA, and my project.

Some of the barriers related to the program and its evaluation are that it is a new program, so the community is still largely unaware that the VNA is providing the service of educating students and the rest of the community on meningitis. Also, the program is still in the beginning stages, and has little funding to work with. Barriers related to the evaluation include: lack of interest of some schools and lack of money to conduct a more in-depth evaluation.

Summarization of findings

Figure 1 identifies how students found out about the meningitis vaccination clinics. For this question, students were able to choose as many of the options as applied to their situation. The results show that over half (53%) of the students found out about the clinics from their parents. However, it is unclear where the students' parents found out about the clinics. There are low results for finding out about the clinics from an article in a newspaper or newsletter, though it is possible that this is the main source of information for the parents, who then inform their children.

Figure 2 shows that nearly everyone who took the survey found the clinic dates, times, and locations convenient. The VNA worked hard to make a clinic schedule that was diverse in these three areas. This feedback is helpful, and similar dates, times, and locations will be replicated in the future. Though this figure appears optimistic, this survey only polls the students who came to the clinics, but does not account for if there are students who did not attend the clinics due to a scheduling inconvenience.

Figure 3 demonstrates the biggest influences on students to obtain vaccination against meningitis. Almost half (47%) of students listed 'university requirement for admission' as their reason for vaccination. This result is significant because, though 53% of students listed their parents as their source for learning about the vaccination clinics, only 13% listed their parents as their reason for actually receiving the vaccination. Furthermore, parents were not only listed below university requirements, but parents as an influence is also listed below 'health/concern for health' as an influence for vaccination. This result implies that though parents do play a large role making their children aware of the clinics, they are not necessarily the biggest influence for students to

actually get the vaccination. Furthermore, this shows that an increase in promoting vaccination for the purpose of 'students taking control of their health and making wise choices' may be a successful way to increase immunization.

Figure 4 illustrates the number of students who took the survey who plan on attending college in Fall 2006. 83% of the students stated that they are planning on attending. The response to this question is helpful in program evaluation because it gives a general idea of how many students were vaccinated who are still in high school, and how many are vaccinated who have graduated. This result reinforces that 'university requirement' is a big factor in students getting vaccinated, and gives an indication that more emphasis may be needed on educating junior high students, as well as high school freshman, sophomores, and juniors. However, a barrier to obtaining this objective is that this question is that it does not account for those students who are seniors and are graduating, yet have chose not to attend college in Fall 2006.

Statement of issues that may have affected the evaluation's findings

The project was successful at recruiting 120 students, which is 20 more students than the goal. The practices and procedures were successful, and were carried out as planned. Presentations were given, and successful contacts were made. Though the goal has been met, the numbers may not be accurate because there is no way to account for the number of students who were influenced by the VNA outreach program, but chose to get vaccinated by their personal health care provider, or those who were affected by the program, but are already vaccinated, or chose not to get vaccinated at this time.

Recommendations

Based on the results of the surveys and my experience with the project, my recommendations are as follows:

- Begin the letter writing campaign no later than March 1, in order to have plenty of time to establish a plan of intervention with the contact, as well as time to schedule presentations, question and answer sessions, etc., before the school year is over
- Based on the survey findings of 53% of those vaccinated heard about the clinics from their parents, and 19% listed their parents as their influence for obtaining a vaccination, I recommend that there is more interaction between the VNA and parents, particularly through the use of school PTA's. Presentations at schools should always include PTA groups, and invitations should be extended to parents of all students.
- Involve healthcare providers due to ACIP and CDC recommendations
- Conduct pre and post test surveys when giving presentations to measure increase in awareness of meningitis

University Vision Statement

The goal of my Capstone Project is to empower the adolescents, young adults, and parents to make well informed decisions about whether or not a meningococcal vaccine is right for them. My Capstone Project will fit perfectly with CSUMB's vision statement. CSUMB places a strong emphasis on service through education, as well as reaching out to the diverse population California. My project involves reaching out into

communities and educating school administrators, teachers, school nurses, parents, adolescents, and young adults about the meningococcal disease. This knowledge will lay the ground work for empowering the individuals of this community to make an informed decision about whether or not a meningococcal vaccine is the right course of action for them.

Collaborative Health and Human Services (CHHS) Major Learning Outcomes (MLO's)

The MLO's I concentrated on with my project include: *Collaboration, Information Management, Leadership, and Professional Development*. This project involved the collaboration of the VNA and several other organizations, including local schools, churches, and other groups. I worked to understand the needs of each individual organization, and with their help, I developed a plan that was a good fit for them. For some schools I wrote articles for their school newsletters, some I gave presentations at, and for some I gave information for distribution to parents.

This project required my ability to manage information. I created a database of contacts, individual plans for different organizations, and a concise power point presentation. Also, I analyzed seventy-two surveys and made recommendations based on the information obtained from them, and created charts in Microsoft Excel that reflect my findings (See attached).

Leadership was an essential skill for this project. My field mentor guided my experience, but made the project mine. I steered the direction of the project, and through my own research, became very knowledgeable about meningitis. I used this knowledge

to explain the importance of vaccination, particularly amongst our target population, who are most vulnerable to the disease. I was able to answer questions raised by school nurses, principals, parents, and students, and provided them with necessary information.

This experience greatly contributed to my professional development. My field mentor, Andrea Zoodsma, is a terrific role model of a professional. Furthermore, I wrote many professional letters and articles, and gained an understanding of the importance of being a professional, so that people will take meningitis seriously, and consider vaccination.

At the Capstone Festival, I will be presenting my project using Microsoft Power Point. I will give an oral presentation based on this paper.

How This Project Will Benefit the VNA

The marketing plan I created will serve the VNA because it gives the next person to take over the project (most likely a future student), a guideline for implementing and maintaining the project. Furthermore, in this project I have completed most of the groundwork, which will give the next person to take over the ability to take the project to the next level, which is increasing VNA contacts, giving more presentations, and hopefully, resulting in more vaccinations given.

Furthermore, **t**his project is contributes to the VNA because it is reaching out to the community to raise awareness about meningococcal disease. Part of the VNA's mission is to provide alternatives to health care options to what is given in hospitals and

other settings. VNA’s community services programs are committed to education in wellness and outreach efforts help members of the community achieve optimal health.

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